

TOWN OF NEWINGTON

131 Cedar Street Newington, Connecticut 06111

Parks & Recreation Department

Creative Playtime Preschool Program Parent's Agreement

Child's Name:	Parent's Name:
Verification of Receipt of	Parent Handbook
	hat I have read the Creative Playtime Preschool Program's Parent pline and behavior policies that will be implemented in the classroom.
Parent's Signature:	Date:
Discussion of Behavior M	anagement Techniques
	d behaviors in the facility have been discussed with me prior to needed during the period of my child's enrollment.
Parent's Signature:	Date:
Non-Refundable Deposit	
I understand that the 25% deposit p Playtime Preschool Program is not	aid at the time of registration to reserve my child's spot in Creative -refundable .
Parent's Signature:	Date:
Payment Agreement (plea	se check one)
the full balance of paymen will be assessed if this pay	e chosen to pay my child's registration fees in full. I understand that is required on or before 7/15/2020. I understand that a \$25 late fee ment is more than one week overdue and that if this payment is more will forfeit my child's space in the program, my deposit, and any othene program.
payments will be my responsibility assessed for each payment weeks overdue, I will forfer	have chosen the payment plan option and understand and agree that insibility and will be due on or before 7/15/2020, 10/15/2020 and at I will not receive reminder notices when these bills are due and that to make the payments on time. I understand that a \$25 late fee will be more than one week overdue and that if any payment is more than two it my child's space in the program, my deposit, and any other fees or ram. I also understand that I may choose to pay in full at any time.
Parent's Signature:	Date: